1019254755

_	PATEN	T APPL	ICAT E1	ION FEE	DETE	ERMIN. , 1997	ATION REC	COR	D	Application	n or Di	ocket Numi	Der
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY			OTHER TH	
FOR			NUMBER FILED			NUMBER EXTRA		7	RATE	FEE	7	RATE	FEE
ВА	SIC FEE		a			*				395.00	٦.		700.0
TOTAL CLAIMS			4	minus 20 =		. 21		1	x\$11=	+	OF	<u> </u>	790.00
INDEPENDENT CLAIMS			7	minus 3 =		. 5		\exists	<u> </u>	231	OR	x\$22=	
MU	LTIPLE DEPE	NDENT CL	AIM PR			L		\exists	x41=	205	OR	x82=	
* If the difference in column 1 is less than zero, enter "0" in column 2							+135=		OR	+270=			
in condition in the less than zero, enter to in				iii coluiii	112			TOTAL	831.	OR	TOTAL	1	
				AMENDE	D - PAF	RT II							D. 711.4.11
		(Colur CLA		S. S. M. B.	191	olumn 2)	(Column 3)	- .	SMAL	L ENTITY	OR		R THAN L ENTITY
AMENDMENT A		REMA AFT AMEND	INING ER		NL PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=	╽	x\$11=		OR	x\$22=	
A BE	Independen	t *		Minus	***		=		x41=		OR	x82=	
	FIRST PRE	SENTATI	ON OF	MULTIPLE	DEPEN	NDENT C	LAIM	1 t	+135=		OR	+270=	
		(0 -1	41			<u></u>		- L	TOTAL		0.0	TOTAL	
		(Colum			2	lumn 2) iHEST	(Column 3)	AL -1	ODIT. FEE		OR	ADDIT. FEE	
AIWEINDIWEN! B		REMAII AFTE AMENDI	ΞR		NUI PREV	MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		x\$11=		OR	x\$22=	
	Independent	*		Minus	***		=	1 F	x41=		OR	x82=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					AIM	 						
								L	+135=		OR	+270=	
_		(Columr			(Colu	ımn 2)	(Column 3)	AD	TOTAL DIT. FEE		OR A	TOTAL DDIT. FEE	
		CLAIM REMAIN AFTE AMENDM	IING R	#5.34	NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
-	Total	*		Minus	**		=	\	(\$11=		OR	x\$22=	
	ndependent	*		Minus	***		=	\vdash	x41=		OR	x82=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLA						\vdash	135=		ŀ			
If the	e entry in column e "Highest Num e "Highest Numb "Highest Numb	har Proviou	oly Daid	LOI IN THIS	SPACE IS	less than 2	mn 3. 20, enter "20." 3, enter "3." ghest number fou	<u></u>	TOTAL	iate box in col	OB L	+270= TOTAL DDIT. FEE	

Application or Docket Number PATENT APPLICATION FEE DETERMINATION RECORD [,] Effective October 1, 1997 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN (Column 1) (Column 2) TYPE SMALL ENTITY **OR FOR NUMBER FILED NUMBER EXTRA** RATE RATE FEE **BASIC FEE** 395.00 790.00 OR **TOTAL CLAIMS** minus 20 = x\$11=x\$22= OR INDEPENDENT CLAIMS minus 3 = x41 =x82=OR MULTIPLE DEPENDENT CLAIM PRESENT +135= +270= OR If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL TOTAL OR **CLAIMS AS AMENDED - PART II** OTHER THAN (Column 1) (Column 2) (Column 3) **SMALL ENTITY** OR **SMALL ENTITY CLAIMS** HIGHEST REMAINING NUMBER PRESENT ADDI-ADDI-ENDMENT **AFTER PREVIOUSLY EXTRA** RATE TIONAL RATE TIONAL AMENDMENT **PAID FOR** FEE FEE Total Minus x\$11=x\$22= OR Independent Minus x41 =x82 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= OR +270= TOTAL TOTAL OR ADDIT. FEE (Column 1) ADDIT. FEE (Column 2) (Column 3) **CLAIMS** HIGHEST REMAINING **PRESENT** ADDI-NUMBER ADDI-**AFTER AMENDMENT PREVIOUSLY** RATE TIONAL **EXTRA** RATE TIONAL **AMENDMENT PAID FOR** FEE FEE Total Minus x\$11== x\$22=OR Independent Minus x41= OR x82 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= OR +270= TOTAL TOTAL OR ADDIT, FEE (Column 1) ADDIT. FEE (Column 2) (Column 3) **CLAIMS** HIGHEST REMAINING ADDI-NUMBER PRESENT ADDI-**AFTER** AMENDMENT RATE TIONAL **PREVIOUSLY EXTRA** RATE TIONAL **AMENDMENT** FEE **PAID FOR** FEE Total Minus x\$11= = x\$22= OR Ind pendent Minus x41= OR x82 =FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= OR +270= * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

ADDIT. FEE

OR ADDIT. I
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

TOTAL OR ADDIT. FEE

2.1.22

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09.173864

Total Fee Calculation

Total Fee Calculation										
	Fee Code	Total # Claims	Number Extra	X	Fee	Fee =	T tai			
Basic Filing Fee Total Claims >20 Independent Claims >3 Mult. Dep Claim Present	Sm./Lg. 201/101 203/103 202/102	-20 = 8 -3 =	21	x x	Sm. Entity 395 11. 41.	Lg. Entity = = = =	395 231 205			
Surcharge English Translation TOTAL FEE CALCULA	205/105 139				65.	=	<u>(65.</u>			
Fees due upon filing th	ne application:						<u>896</u> .			
Total Filing Fees Due	\$	896		-						
Less Filing Fees Subm	itted - \$			_						
BALANCE DUE Office of Initial Patenty I	= \$ Examination	896.					•			
			,							